

**Alternatives to Abortion Invoice**

<b>Contract #</b>	<u>CS170042007</u>	<b>Vendor Name:</b>	<u>Lutheran Family and Childrens Services of Missouri</u>
<b>Vendor Number:</b>	<u>43065265000/MB00091282</u>	<b>Vendor Address:</b>	<u>9666 Olive Blvd Suite 400</u>
			<u>St. Louis, MO 63132</u>

**Bill To:** Office of Administration  
Commissioner's Office  
201 W. Capitol Ave, Room 125  
Jefferson City, MO 65101

**Invoice Number:** 43176915101  
**Invoice Date:** 4/4/2017  
**Service Period:** April

<u><b>Total Contracted Allocation</b></u>	<u><b>Prior Invoiced Total</b></u>	<u><b>Monthly Award Amount</b></u>
\$ 364,538.56	\$ 145,815.42	\$ 72,907.71
Quarterly expenditure adjustment:		\$ -
Total Due:		<b>\$ 72,907.71</b>
Allocation Remaining		\$ 145,815.43

**Signature:** Kristen Decker